

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2008 calendar year, or tax year beginning

B Check if applicable

- ☐ Address change
☐ Name change
☐ Initial return
☐ Termination
☐ Amended return
☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization

NUCLEAR ENERGY INSTITUTE, INC.

Doing Business As

Number and street (or P O box if mail is not delivered to street address)

1776 I STREET, NW

Room/suite

400

City or town, state or country, and ZIP + 4

WASHINGTON

DC

20006-3708

D Employer identification number

52-1209124

E Telephone number

202-739-8000

G Gross receipts \$

63,011,986

F Name and address of principal officer

MARVIN S. FERTEL 1776 I STREET, NW, 400, WASHINGTON, DC 200

H(a) Is this a group return for affiliates?

☐ Yes ☒ No

H(b) Are all affiliates included?

☐ Yes ☐ No

If "No," attach a list (see instructions)

I Tax-exempt status ☒ 501(c) (6) (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: www.nei.org

H(c) Group exemption number

K Type of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation 1994

M State of legal domicile DC

Part I Summary

1 Briefly describe the organization's mission or most significant activities: The Nuclear Energy Institute (NEI) is the policy organization of the nuclear energy and technologies industry and participates in both the national and global policy-making process.

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	45
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	44
5	Total number of employees (Part V, line 2a)	5	139
6	Total number of volunteers (estimate if necessary)	6	0
7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	37,424,509	39,755,505
9	Program service revenue (Part VIII, line 2g)	2,167,608	3,515,051
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,349,945	-1,339,226
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	13,048	11,341
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	41,955,110	41,942,671
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	0	355,800
14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	23,235,379	27,752,244
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b	Total fundraising expenses (Part IX, column (D), line 25)	0	0
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	20,946,273	21,732,352
18	Total expenses—add lines 13–17 (must equal Part IX, column (A), line 25)	44,181,652	49,840,396
19	Revenue less expenses. Subtract line 18 from line 12	-2,226,542	-7,897,725

		Beginning of Year	End of Year
20	Total assets (Part X, line 16)	30,274,718	20,953,321
21	Total liabilities (Part X, line 26)	23,597,508	32,032,969
22	Net assets or fund balances. Subtract line 21 from line 20	6,677,210	-11,079,648

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer

Date

PHYLLIS M. RICH, SENIOR VICE PRESIDENT & TREASURER

Type or print name and title

Paid Preparer's Use Only

Preparer's signature

Date

Check if self-employed ☐

Preparer's identifying number (see instructions)

Firm's name (or yours if self-employed), address, and ZIP + 4

STOKES & COMPANY, P C

EIN

Phone no 202-293-9000

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2008)

(HTA)

Part III **Statement of Program Service Accomplishments** (see instructions)**1** Briefly describe the organization's mission:

The Nuclear Energy Institute, Inc. is a District of Columbia not-for-profit corporation established to further the peaceful use of nuclear energy and to support the nuclear energy industry.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.

Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)

Communications - Communications with the industry, Federal Government, state and local policy makers, the media, opinion leaders and the general public.

4b (Code:) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)

Nuclear Generation - Comprehensive management and policy direction and industry coordination for the resolution of a broad range of generic technical and regulatory issues affecting nuclear power.

4c (Code:) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)

Governmental Affairs - Implementation of government relations policies, strategies and plans approved and promulgated by NEI and its members.

4d Other program services. (Describe in Schedule O.)

(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)

4e Total program service expenses ▶ \$ 0 (Must equal Part IX, Line 25, column (B).)

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A		X
2 Is the organization required to complete Schedule B, Schedule of Contributors?		X
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II N/A		
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	X	
6 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
10 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V		X
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	X	
12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the U.S.?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III		X
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I		X
18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		X
19 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H		X
21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	X	
22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? N/A		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? N/A		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? N/A		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I N/A		
b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I N/A		
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		
a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35	X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> N/A	36	
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	X

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	1a 92	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 139	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> this return (see instructions)	2b X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O N/A	3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X
b	If "Yes," enter the name of the foreign country. ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? N/A	5c	
6a	Did the organization solicit any contributions that were not tax deductible?	6a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? N/A	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75? N/A	7a	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? N/A	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? N/A	7c	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? N/A	7e	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? N/A	7f	
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? N/A	7g	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? N/A	7h	
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? N/A	8	
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966? N/A	9a	
b	Did the organization make a distribution to a donor, donor advisor, or related person? N/A	9b	
10	Section 501(c)(7) organizations. Enter: N/A		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter: N/A		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? N/A	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

		Yes	No
For each "Yes" response to lines 2–7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body	1a	45
b	Enter the number of voting members that are independent	1b	44
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5	X
6	Does the organization have members or stockholders?	6	X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	8a	X
b	Each committee with authority to act on behalf of the governing body?	8b	X
9a	Does the organization have local chapters, branches, or affiliates?	9a	X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9b	N/A
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990.	10	X
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.	11	X

Section B. Policies

		Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13.	12a	X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done.	12c	X
13	Does the organization have a written whistleblower policy?	13	X
14	Does the organization have a written document retention and destruction policy?	14	X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:		
a	The organization's CEO, Executive Director, or top management official?	15a	X
b	Other officers or key employees of the organization?	15b	X
	Describe the process in Schedule O. (see instructions).		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b	N/A

Section C. Disclosure

17	List the states with which a copy of this Form 990 is required to be filed	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.	
	<input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request	
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization:	
	NEI (202) 739-8000	
	1776 I STREET, NW, WASHINGTON, DC 20006-3708	

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☐ Check this box if the organization did not compensate any officer, director, trustee, or key employee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Mr. John W. Rowe Chairman	1	X						-0-	-0-	-0-
Mr. W. Gary Gates Vice Chairman	1	X						-0-	-0-	-0-
Mr. Anthony J. Alexander Director	1	X						-0-	-0-	-0-
Mr. Ronald D. Asche Director	1	X						-0-	-0-	-0-
Mr. Ronald E. Ault Director	1	X						-0-	-0-	-0-
Mr. J. Barnie Beasley, Jr. Director	1	X						-0-	-0-	-0-
Dr. Aris S. Candris Director	1	X						-0-	-0-	-0-
Mr. Thomas A. Christopher Director	1	X						-0-	-0-	-0-
Mr. Steve Creamer Director	1	X						-0-	-0-	-0-
Dr. H. Lee Dodds Director	1	X						-0-	-0-	-0-
Mr. Anthony F. Earley, Jr. Director	1	X						-0-	-0-	-0-
Mr. John A. Fees Director	1	X						-0-	-0-	-0-
Dr. Audeen W. Fentiman Director	1	X						-0-	-0-	-0-
Mr. Alan J. Fohrer Director	1	X						-0-	-0-	-0-
Mr. Richard F. Gill Director	1	X						-0-	-0-	-0-
Mr. James J. Graham Director	1	X						-0-	-0-	-0-
Mr. Gerald W. Grandey Director	1	X						-0-	-0-	-0-

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Mr. Michael S. Greene Director	1	X						-0-	-0-	-0-
Mr. Lewis Hay, III Director	1	X						-0-	-0-	-0-
Mr. William P. Hite Director	1	X						-0-	-0-	-0-
Mr. Ralph Izzo Director	1	X						-0-	-0-	-0-
Mr. William D. Johnson Director	1	X						-0-	-0-	-0-
Mr. John S. Keenan Director	1	X						-0-	-0-	-0-
Mr. Richard C. Kelly Director	1	X						-0-	-0-	-0-
Mr. Thomas D. Kilgore Director	1	X						-0-	-0-	-0-
Mr. Mark F. McGettrick Director	1	X						-0-	-0-	-0-
Mr. James H. Miller Director	1	X						-0-	-0-	-0-
Mr. Michael G. Morris Director	1	X						-0-	-0-	-0-
Mr. William T. Morrow Director	1	X						-0-	-0-	-0-
Mr. Richard A. Muench Director	1	X						-0-	-0-	-0-
1b Total								7,786,629	-0-	1,692,392

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization **54**

3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

	Yes	No
3		X
4	X	
5		X

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation
Hill & Knowlton PO Box 8500-4445 Philadelphia PA 19178	Project Management	2,779,671
The Wackenhut Corporation PO Box 277469 Atlanta GA 20384-7469	Project Management	2,751,257
Smith & Harroff Inc 99 Canal Center Plaza, Suite 200 Alexandria VA 223	Ad Placement & Proj Mgmt	2,459,752
Canberra Industries, Inc General Post Office Box 27746 New York NY 10087	Project management	1,669,266
Pillsbury Winthrop Shaw Pitt PO Box 601240 Charlotte NC 28260-1240	Legal Services	506,869

2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization **39**

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns	1a	0				
	b	Membership dues	1b	39,755,505				
	c	Fundraising events	1c	0				
	d	Related organizations	1d	0				
	e	Government grants (contributions)	1e	0				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	0				
	g	Noncash contributions included in lines 1a-1f: \$		0				
	h	Total. Add lines 1a-1f		39,755,505				
	Program Service Revenue	2a	CONFERENCE INCOME	Business Code 519100	3,451,106	3,451,106		
b		PUBLICATION SALES	511190	63,945	63,945			
c		. . . . .		0				
d		. . . . .		0				
e		. . . . .		0				
f		All other program service revenue		0				
g		Total. Add lines 2a-2f		3,515,051				
Other Revenue		3	Investment income (including dividends, interest, and other similar amounts)		1,567,499			1,567,499
	4	Income from investment of tax-exempt bond proceeds		0				
	5	Royalties		0				
	6a	Gross Rents	(i) Real	(ii) Personal				
		b	Less: rental expenses					
		c	Rental income or (loss)	0	0			
		d	Net rental income or (loss)		0			
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b	Less: cost or other basis and sales expenses	18,162,590	0			
		c	Gain or (loss)	21,069,315	0			
		d	Net gain or (loss)	-2,906,725	0	-2,906,725		
	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	a	0				
		b	Less: direct expenses	b	0			
		c	Net income or (loss) from fundraising events		0			
		9a	Gross income from gaming activities. See Part IV, line 19	a	0			
	b		Less: direct expenses	b	0			
	c		Net income or (loss) from gaming activities		0			
	10a		Gross sales of inventory, less returns and allowances	a	0			
		b	Less: cost of goods sold	b	0			
		c	Net income or (loss) from sales of inventory		0			
Miscellaneous Revenue		Business Code						
11a	OTHER INCOME	900099	11,341	11,341				
b	. . . . .		0					
c	. . . . .		0					
d	All other revenue		0					
e	Total. Add lines 11a-11d		11,341					
12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e		41,942,671	3,526,392	0	1,567,499		

Part IX Statement of Functional Expenses**Section 501(c)(3) and 501(c)(4) organizations must complete all columns.****All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).**

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	355,800			
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	0			
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0			
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	8,142,913			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	11,385,461			
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	4,670,847			
9 Other employee benefits	2,618,849			
10 Payroll taxes	934,174			
11 Fees for services (non-employees):				
a Management	0			
b Legal	1,685,804			
c Accounting	69,382			
d Lobbying	0			
e Professional fundraising services. See Part IV, line 17	0			
f Investment management fees	0			
g Other	0			
12 Advertising and promotion	0			
13 Office expenses	0			
14 Information technology	0			
15 Royalties	0			
16 Occupancy	2,559,427			
17 Travel	1,468,807			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	3,143,978			
20 Interest	0			
21 Payments to affiliates	0	0	0	0
22 Depreciation, depletion, and amortization	411,773	0	0	0
23 Insurance	0			
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a PROGRAM ISSUES	10,342,902			
b EQUIPMENT RENTAL & MAINTENANCE	539,281			
c PRINTING & PUBLICATIONS	374,472			
d SUPPLIES	306,201			
e COMPUTER SERVICES	292,418			
f All other expenses	537,907			
25 Total functional expenses. Add lines 1 through 24f	49,840,396	0	0	0
26 Joint Costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	400	1	400
	2 Savings and temporary cash investments	1,418,232	2	3,189,449
	3 Pledges and grants receivable, net	0	3	0
	4 Accounts receivable, net	1,318,463	4	1,362,178
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L	0	5	0
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L	0	6	0
	7 Notes and loans receivable, net	0	7	0
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	849,438	9	475,399
	10a Land, buildings, and equipment, cost basis	4,040,543		
	b Less accumulated depreciation. Complete Part VI of Schedule D	2,676,554		
	11 Investments—publicly traded securities	749,775	10c	1,363,989
	12 Investments—other securities. See Part IV, line 11	23,209,938	11	10,809,817
	13 Investments—program-related. See Part IV, line 11	0	12	0
	14 Intangible assets	0	13	0
	15 Other assets. See Part IV, line 11	2,728,472	14	3,752,089
16 Total assets. Add lines 1 through 15 (must equal line 34)	30,274,718	15	20,953,321	
Liabilities	17 Accounts payable and accrued expenses	19,740,966	16	27,897,813
	18 Grants payable		17	
	19 Deferred revenue	3,856,542	18	4,135,156
	20 Tax-exempt bond liabilities	0	19	0
	21 Escrow account liability. Complete Part IV of Schedule D		20	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0	21	0
	23 Secured mortgages and notes payable to unrelated third parties	0	22	0
	24 Unsecured notes and loans payable	0	23	0
	25 Other liabilities. Complete Part X of Schedule D	0	24	0
	26 Total liabilities. Add lines 17 through 25	23,597,508	25	32,032,969
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	6,677,210	26	-11,079,648
	28 Temporarily restricted net assets		27	
	29 Permanently restricted net assets		28	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		29	
	31 Paid-in or capital surplus, or land, building, or equipment fund		30	
	32 Retained earnings, endowment, accumulated income, or other funds		31	
	33 Total net assets or fund balances	6,677,210	32	-11,079,648
	34 Total liabilities and net assets/fund balances	30,274,718	33	20,953,321

Part XI Financial Statements and Reporting

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	X
b Were the organization's financial statements audited by an independent accountant?	2b	X
c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	X
b If "Yes," did the organization undergo the required audit or audits? N/A	3b	

Political Campaign and Lobbying Activities

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527

- ▶ **To be completed by organizations described below.**
- ▶ **Attach to Form 990 or Form 990-EZ.**

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B. Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of organization NUCLEAR ENERGY INSTITUTE, INC.	Employer identification number 52-1209124
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Part I-A To be completed by all organizations exempt under section 501(c) and section 527 organizations.
See the instructions for Schedule C for details.

- | | | | |
|---|---|------|---|
| 1 | Provide a description of the organization's direct and indirect political campaign activities in Part IV. | | |
| 2 | Political expenditures | ▶ \$ | 0 |
| 3 | Volunteer hours | | 0 |

Part I-B To be completed by all organizations exempt under section 501(c)(3).
See the instructions for Schedule C for details.

- | | | | | |
|----|---|--|------|--|
| 1 | Enter the amount of any excise tax incurred by the organization under section 4955 | | ▶ \$ | 0 |
| 2 | Enter the amount of any excise tax incurred by organization managers under section 4955 | | ▶ \$ | 0 |
| 3 | If the organization incurred a section 4955 tax, did it file Form 4720 for this year? | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 4a | Was a correction made? | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| b | If "Yes," describe in Part IV. | | | |

Part I-C To be completed by all organizations exempt under section 501(c), except section 501(c)(3).
See the instructions for Schedule C for details.

- | | | | | |
|---|---|--|------|--|
| 1 | Enter the amount directly expended by the filing organization for section 527 exempt function activities | | ▶ \$ | 0 |
| 2 | Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities | | ▶ \$ | 0 |
| 3 | Total of direct and indirect exempt function expenditures. Add lines 1 and 2 and enter here and on Form 1120-POL, line 17b | | ▶ \$ | 0 |
| 4 | Did the filing organization file Form 1120-POL for this year? | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 5 | State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. Enter the amount paid and indicate if the amount was paid from the filing organization's funds or were political contributions received and promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV | | | |

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
			0	0
			0	0
			0	0
			0	0
			0	0
			0	0

Part II-A To be completed by organizations exempt under section 501(c)(3) that filed Form 5768 (election under section 501(h)). See the instructions for Schedule C for details

- A Check ☐ if the filing organization belongs to an affiliated group.
B Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)	0	0												
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	0	0												
c	Total lobbying expenditures (add lines 1a and 1b)	0	0												
d	Other exempt purpose expenditures	0	0												
e	Total exempt purpose expenditures (add lines 1c and 1d)	0	0												
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	0	0												
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)	0	0												
h	Subtract line 1g from line 1a. Enter -0- if line g is more than line a	0	0												
i	Subtract line 1f from line 1c. Enter -0- if line f is more than line c	0	0												
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No													

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f of the instructions.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
2a Lobbying non-taxable amount	0	0	0		0
b Lobbying ceiling amount (150% of line 2a, column(e))					0
c Total lobbying expenditures	0	0	0		0
d Grassroots non-taxable amount	0	0	0		0
e Grassroots ceiling amount (150% of line 2d, column (e))					0
f Grassroots lobbying expenditures	0	0	0		0

Part II-B To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768 (election under section 501(h)). See the instructions for Schedule C for details.

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?			
i Other activities? If "Yes," describe in Part IV.			
j Total lines 1c through 1i.			0
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912.			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912.			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). See the instructions for Schedule C for details.

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	X
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	X
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?	3 X	

Part III-B To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes." See Schedule C instructions for details.

1 Dues, assessments and similar amounts from members.	1	39,755,505
2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year.	2a	2,262,089
b Carryover from last year.	2b	-2,660,189
c Total.	2c	-398,100
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues.	3	596,333
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	-994,433
5 Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4).	5	0

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information.

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Part IV Supplemental Information (continued)[illegible]

**SCHEDULE D
(Form 990)**

Supplemental Financial Statements

OMB No 1545-0047

2008

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

► **Attach to Form 990. To be completed by organizations that
answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.**

Name of the organization

NUCLEAR ENERGY INSTITUTE, INC

Employer identification number

52-1209124

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
☐ Preservation of land for public use (e.g., recreation or pleasure) ☐ Preservation of an historically important land area
☐ Protection of natural habitat ☐ Preservation of certified historic structure
☐ Preservation of open space

2 Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ►

4 Number of states where property subject to conservation easement is located ►

5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ►

7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ► \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 ► \$

(ii) Assets included in Form 990, Part X ► \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ► \$

b Assets included in Form 990, Part X ► \$

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a** ☐ Public exhibition **d** ☐ Loan or exchange programs
b ☐ Scholarly research **e** ☐ Other

c ☐ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

	Amount
1c Beginning balance	
1d Additions during the year	
1e Distributions during the year	
1f Ending balance	0

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☒ No

b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Investment earnings or losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	0				

2 Provide the estimated percentage of the year end balance held as:

- a** Board designated or quasi-endowment ☐ %
b Permanent endowment ☐ %
c Term endowment ☐ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) unrelated organizations	3a(i)	
(ii) related organizations	3a(ii)	
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b	

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land	0	0		0
b Buildings	0	0	0	0
c Leasehold improvements	0	767,224	94,424	672,800
d Equipment	0	3,273,319	2,582,130	691,189
e Other	0	0	0	0
Total. Add lines 1a–1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				1,363,989

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	41,942,671
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	49,840,396
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-7,897,725
4	Net unrealized gains (losses) on investments	4	-4,093,418
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net). Add lines 4-8	9	-4,093,418
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-11,991,143

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	37,798,278
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	-4,093,418
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	-4,093,418
3	Subtract line 2e from line 1	3	41,891,696
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	50,975
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	50,975
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	41,942,671

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	49,789,421
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	49,789,421
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	50,975
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	50,975
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	49,840,396

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.

Part XIV Supplemental Information *(continued)*

Area with horizontal dashed lines for supplemental information.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service
Name of the organization

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the U.S.**

▶ Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.
▶ Attach to Form 990.

OMB No 1545-0047

2008

**Open to Public
Inspection**

Name of the organization

NUCLEAR ENERGY INSTITUTE, INC.

Employer identification number

52-1209124

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☒ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed. ☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Alliance to Save Energy 1850 M St. NW, Suite 600 Washington	52-1082991	501(c)(3)	10,000	0			Awards Din. Sponsor
American Heart Association 4301 North Fairfax Dr. Arlington	13-5613797	502(c)(3)	15,000	0			Din. Table Sponsor
ASAE AAA Fund Summit Awards 1575 I St. NW Washington, DC 20	53-0026940	501(c)(6)	10,000	0			Awards Din. Sponsor
Armed Services YMCA of the USA 6359 Walker Lane, Suite 200 Alex	36-3274346	501(c)(3)	5,000	0			Din. Table Sponsor
Boy Scouts of America 9190 Rockville Pike Bethesda, MD	53-0204610	501(c)(3)	5,000	0			Award Reception
Boys and Girls Clubs of America 1275 Peachtree St., NE Atlanta, G	13-5562976	501(c)(3)	5,000	0			Donation
Center for American Progress 1333 H St., NW 10th Floor Washi	30-0126510	501(c)(3)	25,000	0			Contribution
The Washington Literary Council 1930 18th St. NW Washington, D	52-6063003	501(c)(3)	7,500	0			Congr. Baseball Gam
Congressional Black Caucus 1720 Massachusetts Ave., NW W	52-2270607	501(c)(4)	15,000	0			Scholarships
Democratic Leadership Committee 236 Massachusetts Ave., NW Sui	52-0212296	501(c)(4)	50,000	0			Contribution
Eastern Seals Greater Wash-Bal R 4041 Powder Mill Road, Suite 100	53-0212296	501(c)(3)	5,000	0			Advocacy Awd Spon.
Economic Dev. Corp. of Lea Coun 200E Broadway, Ste A201 PO Box	85-0164863	501(c)(6)	64,800	0			Grant-Interim Storage

- 2 Enter total number of section 501(c)(3) and government organizations **8**
- 3 Enter total number of other organizations **4**

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

(HTA)

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Use Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
	0	0	0		
	0	0	0		
	0	0	0		
	0	0	0		
	0	0	0		
	0	0	0		
	0	0	0		
	0	0	0		
	0	0	0		

Part IV

Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Part I Line 2 Fund use is monitored either through the review of annual reports or meeting attendance

Continuation Sheet for Schedule I (Form 990)

2008

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 to list additional information for
Part II and Part III, Schedule I (Form 990).

Name of the organization

Employer identification number

NUCLEAR ENERGY INSTITUTE, INC.

52-1209124

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
James E. Clyburn Res. & Sch. Fd. 499 South Capital St., SW Washin	57-0976265	501(c)(3)	10,000	0			Pledge
J. Street Cup							
44 Canal Center Plaza, Suite 200	20-4561025	501(c)(3)	5,000	0			Gold Sponsorship
Mount Vernon Ladies Association Group Res. PO Box 110 Mount Ve	54-0564701	501(c)(3)	5,000	0			Patron Level Spon.
National Democratic Club							
30 Ivy St., SE Washington, DC 20	53-0233594	501(c)(7)	5,000	0			Tip O'Neil Fundraiser
NCSL Foundation for State Leg.							
7700 East First Place Denver, CO	74-2232576	501(c)(3)	50,000	0			Funding Support
Prevent Cancer Foundation							
PO Box 34885 Alexandria, VA 223	52-1429544	501(c)(3)	10,000	0			Patron Sponsorship
Rebuilding Together							
1536 16th St., NW Washington, D	52-1585880	501(c)(3)	6,000	0			Gold Sponsorship
U.S. Capitol Historical Society							
200 Maryland Ave., NE Washingto	52-0796820	501(c)(3)	5,000	0			Sponsorship
United States Navy Memorial Fdn							
701 Pennsylvania Ave., NW Suite	52-1104476	501(c)(3)	5,000	0			Fundraising Evt Sup.
WAVE, Inc.							
601 Pennsylvania Ave., NW Suite	51-0170226	501(c)(3)	7,500	0			Fundraising Evt Sup.
Women's Council on Energy & Env							
PO Box 33211 Washington, DC 20	52-1258690	501(c)(3)	5,000	0			Awards Din. Sponsor
Third Way							
1025 Connecticut Ave., NW Ste 5	20-1734070	501(c)(4)	25,000	0			Contribution
			0	0			
			0	0			
			0	0			
			0	0			

2	Enter total number of Section 501(c)(3) and government organizations	10
3	Enter total number of other organizations	2

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

▶ **Attach to Form 990. To be completed by organizations
that answered "Yes" to Form 990, Part IV, line 23.**

OMB No 1545-0047

2008

**Open to Public
Inspection**

Name of the organization

NUCLEAR ENERGY INSTITUTE, INC.

Employer identification number

52-1209124

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|---|
| <input checked="" type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input checked="" type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input checked="" type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

b If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? . . .

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a:

- | | | |
|--|-----------|---|
| a Receive a severance payment or change of control payment? | 4a | X |
| b Participate in, or receive payment from, a supplemental nonqualified retirement plan? | 4b | X |
| c Participate in, or receive payment from, an equity-based compensation arrangement? | 4c | X |
- If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.

Only 501(c)(3) and 501(c)(4) organizations must complete lines 5–8.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of

- | | | | |
|--|-----|-----------|--|
| a The organization? | N/A | 5a | |
| b Any related organization? | N/A | 5b | |
- If "Yes" to line 5a or 5b, describe in Part III.

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- | | | | |
|--|-----|-----------|--|
| a The organization? | N/A | 6a | |
| b Any related organization? | N/A | 6b | |
- If "Yes" to line 6a or 6b, describe in Part III.

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III N/A

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III N/A

Yes No

1b

X

2

X

4a

4b

4c

5a

5b

6a

6b

7

8

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
Mr. Frank L. Bowman	(i)	878,462	1,055,350	1,017,618	46,291	5,627	3,003,348	758,295
	(ii)	0	0	0	0	0	0	0
Mr Marvin S. Fertel	(i)	386,395	160,160	196,826	330,750	19,847	1,093,978	0
	(ii)	0	0	0	0	0	0	0
Mr. Alexander W. Flint	(i)	371,664	145,600	719	251,832	18,227	788,042	0
	(ii)	0	0	0	0	0	0	0
Ms. Ellen Ginsberg	(i)	253,603	78,750	965	142,724	19,468	495,510	0
	(ii)	0	0	0	0	0	0	0
Ms. Angie S. Howard	(i)	333,292	104,550	428,969	67,615	19,789	954,215	6,471
	(ii)	0	0	0	0	0	0	0
Mr. Richard J. Myers	(i)	207,292	66,000	56,378	99,576	19,323	448,569	42,932
	(ii)	0	0	0	0	0	0	0
Mr. J. Scott Peterson	(i)	232,406	68,466	706	103,725	17,931	423,234	0
	(ii)	0	0	0	0	0	0	0
Mr. Anthony R. Pietrangelo	(i)	206,900	61,500	443	79,655	20,452	368,950	0
	(ii)	0	0	0	0	0	0	0
Ms Phyllis M. Rich	(i)	266,540	80,625	259	229,799	6,879	584,102	0
	(ii)	0	0	0	0	0	0	0
Mr Michael A. Bauser	(i)	212,026	30,570	2,869	60,945	7,394	313,804	0
	(ii)	0	0	0	0	0	0	0
Mr. Marshall Cohen	(i)	206,925	28,750	1,283	32,792	22,113	291,863	0
	(ii)	0	0	0	0	0	0	0
Ms. Anne W. Cottingham	(i)	181,759	16,469	4,540	26,853	1,314	230,935	0
	(ii)	0	0	0	0	0	0	0
Ms. Hannah S. Simone	(i)	180,000	23,007	526	6,987	1,162	211,682	0
	(ii)	0	0	0	0	0	0	0
Mr. Chinch V. Wollerton	(i)	204,343	29,119	4,005	10,890	22,432	270,789	0
	(ii)	0	0	0	0	0	0	0
	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

Part I Line 1A Health club dues & financial advisor fees paid on behalf of only President & CEO included in gross wages. 1st class airfare also paid

Part I Line 4B Frank Bowman reported \$1,000,469 on his W-2 of which \$758,295 was previously reported on form 990

Part I Line 4B Marvin Fertel reported \$193,397 on his W-2 and \$316,650 is reported as deferred

Part I Line 4B Alexander Flint has \$235,082 reported as deferred

Part I Line 4B Ellen Ginsberg has \$97,563 reported as deferred

Part I Line 4B Angie Howard reported \$426,294 on her W-2 of which \$6,471 was previously reported on form 990

Part I Line 4B Richard Myers reported \$54,709 on his W-2 of which \$42,932 was previously reported on form 990

Part I Line 4B Scott Peterson has \$71,064 reported as deferred

Part I Line 4B Anthony Pietrangelo has \$22,742 reported as deferred

Part I Line 4B Phyllis Rich has \$203,202 reported as deferred

**SCHEDULE J-2
(Form 990)**

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

OMB No 1545-0047

2008

**Open to Public
Inspection**

Name of the Organization

NUCLEAR ENERGY INSTITUTE, INC.

Employer Identification number

52-1209124

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Mr. Louis E. Pardi Director	1	X						-0-	-0-	-0-
Mr. Joseph V. Parrish Director	1	X						-0-	-0-	-0-
Mr. Ronald E. Pitts Director	1	X						-0-	-0-	-0-
Mr. William J. Post Director	1	X						-0-	-0-	-0-
Mr. Gary L. Rainwater Director	1	X						-0-	-0-	-0-
Mr. David M. Ratcliffe Director	1	X						-0-	-0-	-0-
Mr. K. Keith Roe Director	1	X						-0-	-0-	-0-
Mr. James E. Rogers, Jr. Director	1	X						-0-	-0-	-0-
Mr. Kirk S. Schnobelen Director	1	X						-0-	-0-	-0-
Mr. Mayo A. Shattuck, III Director	1	X						-0-	-0-	-0-
Mr. James J. Sheppard Director	1	X						-0-	-0-	-0-
Dr. Kris P. Singh Director	1	X						-0-	-0-	-0-
Mr. Richard J. Smith Director	1	X						-0-	-0-	-0-
Mr. William B. Timmerman Director	1	X						-0-	-0-	-0-
Mr. Stephen R. Trtch Director	1	X						-0-	-0-	-0-
Mr. George D. Turner Director	1	X						-0-	-0-	-0-
Mr. John K. Welch Director	1	X						-0-	-0-	-0-
Mr. Alan W. Wendorf Director	1	X						-0-	-0-	-0-
Mr. John F. Young Director	1	X						-0-	-0-	-0-
Mr. Mark Crisson Ex Officio Member	1	X						-0-	-0-	-0-
Mr. James O. Ellis, Jr. Ex Officio Member	1	X						-0-	-0-	-0-

SCHEDULE J-2
(Form 990)

Continuation Sheet for Form 990

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ **Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.**

Name of the Organization

NUCLEAR ENERGY INSTITUTE, INC.

Employer Identification number

52-1209124

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Mr. Glenn English Ex Officio Member	1	X						-0-	-0-	-0-
Mr. Thomas R. Kuhn Ex Officio Member	1	X						-0-	-0-	-0-
Mr. David B. Ripsom, Esq. Ex Officio Member	1	X						-0-	-0-	-0-
Dr. Steven R. Specker Ex Officio Member	1	X						-0-	-0-	-0-
Mr. Frank L. Bowman President & CEO until November	40			X				-0-	-0-	-0-
Mr. Marvin S. Fertel President & CEO from November	40			X				-0-	-0-	-0-
Mr. Alexander W. Flint Senior Vice President	40			X				-0-	-0-	-0-
Ms. Ellen Ginsberg Vice President & Secretary	40			X				-0-	-0-	-0-
Ms. Angie S. Howard Executive Vice President	40			X				-0-	-0-	-0-
Mr. Richard J. Myers Vice President	40			X				-0-	-0-	-0-
Mr. J. Scott Peterson Vice President	40			X				-0-	-0-	-0-
Mr. Anthony R. Pietrangelo Vice President	40			X				-0-	-0-	-0-
Ms. Phyllis M. Rich Vice President and Treasurer	40			X				-0-	-0-	-0-
Mr. Michael A. Bauser Senior Director	40					X		-0-	-0-	-0-
Mr. Marshall Cohen Senior Director	40					X		-0-	-0-	-0-
Ms. Anne W. Cottingham Senior Director	40					X		-0-	-0-	-0-
Ms. Hannah S. Simone Senior Director	40					X		-0-	-0-	-0-
Mr. Chinch V. Wollerton Senior Director	40					X		-0-	-0-	-0-
	0							-0-	-0-	-0-
	0							-0-	-0-	-0-
	0							-0-	-0-	-0-

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information to Form 990

- ▶ **Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.**

OMB No 1545-0047

2008

**Open to Public
Inspection**

Employer identification number

NUCLEAR ENERGY INSTITUTE, INC.

52-1209124

Form 990 Part III Line 4d: Policy Development - Identify and coordinate public policy for the nuclear industry and provide a liaison with other public policy groups and non-governmental organizations on energy and environmental policies of common interest

Form 990 Part VI Section A Line 5 A misappropriation of assets was identified in 2008. A NEI employee ordered and received goods that were not for NEI's use and then submitted falsified invoices for payment. The falsified invoices reflected the purchase of goods that were similar in nature to goods that NEI would use. Management discovered the misappropriation of assets and immediately notified the Board of Directors, insurance company, auditors and law enforcement officials

Form 990 Part VI Section A Line 10 Audit Committee will review form in detail with auditor. Upon its satisfaction, the full Board will receive a copy and will be given reasonable time to review and ask questions before the return is filed

Form 990 Part VI Section B Line 12c Employees are required to sign a conflict of interest report annually to confirm that they understand the policy and that they have disclosed any conflict of interest or appearance of a conflict of interest.

Form 990 Part VI Section B Line 15a-b Salaries for all NEI positions are benchmarked against industry standards, using mid-to large-sized not for profit organizations as key comparators. All non-officer positions are evaluated against a compensation scoring system that ensures the salary range for which this position is set is relative to the position's internal and external responsibilities. CEO/Officer positions are also benchmarked against industry standards annually, using the same comparator group as the other positions. This review is performed by an external consultant who provides his recommendations to the Organization & Compensation committee of the NEI Executive Committee. Those recommendations, if approved by the O&C, are then provided to the EC by the O&C for the EC's final approval.

Form 990 Part VI Section B Line 19 NEI does not make its governing documents, conflict of interest policy, and financial statements available to the public.

Application for Extension of Time To File an Exempt Organization Return

► **File a separate application for each return.**

OMB No. 1545-1709

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☐

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I	Automatic 3-Month Extension of Time. Only submit original (no copies needed).
---------------	--

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only.

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Type or print File by the due date for filing your return See instructions	Name of Exempt Organization		Employer identification number
	NUCLEAR ENERGY INSTITUTE, INC		52-1209124
	Number, street, and room or suite no. If a P.O. box, see instructions		
	1776 I STREET, NW, Room No. 400		
	City, town or post office, state, and ZIP code For a foreign address, see instructions.		
	WASHINGTON		DC 20006-3708

Check type of return to be filed (file a separate application for each return).

- | | | |
|---|---|------------------------------------|
| <input checked="checked" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

- The books are in the care of ► See attached worksheet

Telephone No. ► (202) 739-8000

FAX No. ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension will cover.

- 1** I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 8/15/2009, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
- ▶ ☒ calendar year 2008 or
- ▶ ☐ tax year beginning _____, and ending _____.

- 2** If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3 a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.
(HTA)

Form **8868** (Rev 4-2008)

• If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box. ☒ **X**

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1)

Part II Additional (Not Automatic) 3-Month Extension of Time. You must file original and one copy.

Type or print File by the extended due date for filing the return. See instructions.	Name of Exempt Organization NUCLEAR ENERGY INSTITUTE, INC	Employer identification number 52-1209124
	Number, street, and room or suite no. If a P.O. box, see instructions. 1776 I STREET, NW, Room No. 400	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. WASHINGTON DC 20006-3708	

Check type of return to be filed (File a separate application for each return):

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 4720	<input type="checkbox"/> Form 8870
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 5227	

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of ☒ See attached worksheet
Telephone No. ☒ (202) 739-8000 FAX No. ☐
- If the organization does not have an office or place of business in the United States, check this box. ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ☐. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until 11/15/2009.

5 For calendar year 2008, or other tax year beginning , and ending .

6 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

7 State in detail why you need the extension More time is requested to acquire all information needed to complete and file an accurate return

8 a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$	
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$	
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$	0

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature Title Date